, _				 :) 0	9/	088,	163
	PATENT		ATION FEE	RD	Application/or Docket Number PA / 09/088 / 3					
		CLAIM	IS AS FILE (Column 1	· ·	lumn 2)	SMAI TYP	LL ENTITY	7 . OR	OTHE	R THAN L ENTITY
FC	OR	NI	UMBER FILE			RATE		٦	RATE	
B/	ASIC FEE				A NE			OR		760.00
TC	OTAL CLAIMS		27 min	nus 20= *	7	X\$ 9		OR	September 10	126.00
_	DEPENDENT C			nus 3 = *	4	X39=	- 		V70	210/16
ML	ULTIPLE DEPE	NDENT CLA	AIM PRESENT	, , , , , , , , , , , , , , , , , , ,			_	OR		2/20
* If	f the difference	e in column	n 1 is less tha	n zero, enter "0" in o	column 2	+130=		OR	L	<u></u>
2				DED - PART II	JOIGH III E	TOTA	L	OR		1128.0
二	Tonosagan	(Column	n 1)	(Column 2)	(Column 3)	SMAL	L ENTITY	OR		R THAN ENTITY
AMENDMENT A		REMAINII AFTER AMENDME	IING R IENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	.27		- 27	=	X\$ 9=		OR	X\$18=	
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ı				7		TOTA	AL .	OR	TOTAL	
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ENDMENT B		CLAIMS REMAININ AFTER AMENDME	IS ING R	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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S C		CLAIMS REMAININ AFTER	S NG	HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA	RATE	ADDI- TIONAL	[ADDI-
Į Į	Total	AMENDME		PAID FOR	9	1000	FEE	1	RATE	TIONAL FEE
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* If:	f the entry in colun	mn 1 is less th:	han the entry in ~	olumn 2 Boll :		+130=		OR	+260=	
***If	If the "Highest Num	n 20, enter "20."	TOTAL ADDIT. FEE		OR A	TOTAL DDIT, FEE				
T	he "Highest Num	ber Previously	y Paid For" (Total	THIS SPACE is less than THIS SPACE is less than I or Independent) is the I	13, enter 3. highest number fo	ound in the ar	opropriate box	in colu	IMN 1.	

FORM PTO-875 (Rev. 11/98)